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Medical Examinations By Last Name

Civil War

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10-21-1861

Barker, Daniel W.

Adjutant General

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FORM FOR EXAMINING A RECRUIT.

NAME *Daniel W. Barker*, age *18 years*, occupation  
*Farmer*, born in *Troy* *P. & White*

1. Have you any disease of Brain, or imperfection in eye-sight, or hearing? *no*
2. Have you any disease of throat, or difficulty of utterance? *no*
3. Have you any disease of Lungs or Heart? *no*
4. Have you any disease of Stomach, Liver, Bowels, or Urinary Organs? *no*
5. Have you any Bone, Joint, or Muscle incapacitated by any cause, from performing its natural office? *no*
6. Have you been vaccinated within seven years? *no*

REMARKS.

DATE: *Oct. 21. 1861*

RENDEZVOUS: *Bangor Maine*

*Grason*

Examining Surgeon.